

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		25	05-10-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
1	6/3/01
2	1/2/02
3	09/03/02
4	03/01/03
5	8/21/03
6	
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11	N
12	N
13	N
14	N
15	N
16	N
17	N
18	N
19	N
20	N
21	N
22	N
23	N
24	N
25	N
26	N
27	N
28	N
29	N
30	N
31	✓ ✓ ✓ ± ✓
32	N
33	✓ ✓ ✓ ± ✓
34	✓ ✓ ✓ ± ✓
35	✓ ✓ ✓ ± ✓
36	✓ ✓ ✓ ± ✓
37	✓ ✓ = ± ✓
38	✓
39	✓ ✓ ✓ ± ✓
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41	✓ ✓ ✓ ± ✓
42	✓ ✓ ✓ ± ✓
43	✓ ✓ ✓ ± ✓
44	✓ ✓ ✓ ± ✓
45	✓ ✓ = ± ✓
46	✓ ✓ = ± ✓
47	✓ ✓ = ± ✓
48	✓
49	✓
50	✓

Claim	Date
51	03/06/01
52	21/08/01
53	03/03/02
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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